

Special Education Data Standards

Create IEP

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Nevada Department of Education Contact (Data Steward)

Nick Easter

Description

The purpose of the Special Education Data Standards document is to give Nevada schools and districts a set of guidelines for entering data into the student information system. This document provides a series of screen shots and an explanation of the data elements required for state and federal reporting needs. Data standardization is important to ensure consistency in the data across schools in districts and across districts throughout the state

Data Standard

(Reg sites, data use, etc.)

NAC & NRS for Special Educational Programs

- [387.400-387.400](#)
- [388.001-388.655](#)
- [Ch. 395](#)
- [AB 280-56](#)
- [NRS CH 427A \(AB316\)](#)

How is data used

Data is use to meets Federal Reporting Requirements under Sec. 618 of the IDEA

- IDEA Child Count
- IDEA Exit Report
- IDEA Behavior Report
- IAES End of Year Reporting

Noted Changes for Current Year

Blank

Available ad-Hoc & Reports

Blank

Available Training

[Preschool Educational Environments](#)

- Presentation how to calculate EC Educational Environments.

[IEP Guidelines](#)

- TA document designed to assist IEP teams in developing IEPs.

[IEP Modifications, Accommodations, and Supports](#)

- TA document on Modifications, Accommodations, and Supports.

[IEP and 504 Accommodations 14-15](#)

- IEP and 504 Accommodations Form.

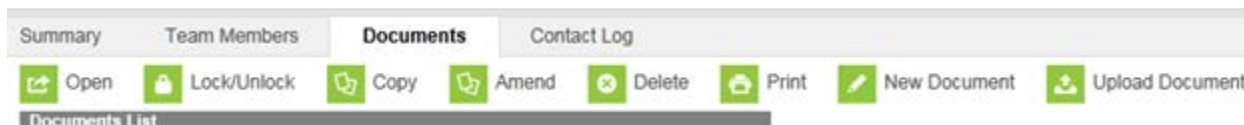
[Extended School Year and Special Education](#)

- TA document on Extended School Year and Special Education.
[2014-2015 NAA Administration Manual \(pdf\)](#)
- Contains NAA Participation Guidelines

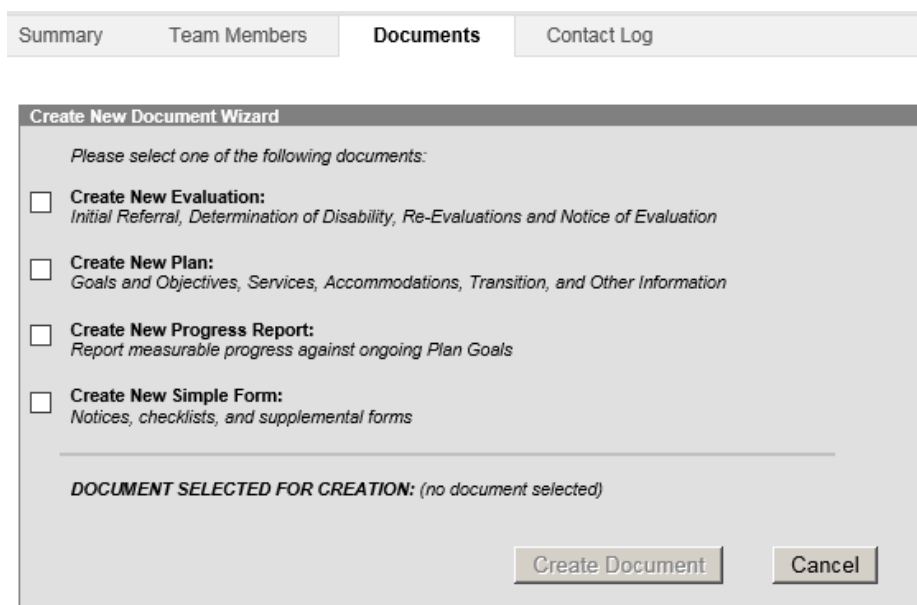
SpEd 1

Create IEP

Campus Path: Student Information > Special Education > Documents Tab



1. Select New Document



In the Create New Document Wizard click on the check box for “Create New Plan”

2. **Create New Form:** from the drop list, select the appropriate NV IEP plan
 - NV IEP Data Plan
 - NV IEP With Transition:
 - in the child’s 8th grade year; or
 - when the child has reached the age of 14 years; or
 - earlier if determined appropriate
 - NV IEP Without Transition

Education Plan

Education Plan	
*Meeting Type	
<input type="checkbox"/> Interim IEP	<input type="checkbox"/> Initial IEP
<input type="checkbox"/> Annual IEP	<input type="checkbox"/> IEP Following 3-Yr Reevaluation
<input type="checkbox"/> Revision to IEP Dated	<input type="checkbox"/> Exit
Date: <input type="text"/>	<input type="text"/>
<input type="checkbox"/> IEP Revision Without A Meeting:	<input type="checkbox"/> Other:
At the request of: <input type="text"/>	<input type="text"/>
*Date of Meeting:	
Date of Last IEP Meeting:	<input type="text" value="10/23/2015"/>
*IEP Services will Begin:	<input type="text"/>
*Anticipated Duration of Services:	<input type="text"/>
IEP Review Date:	<input type="text"/>
Eligibility	
*Eligibility Date:	<input type="text"/>
*Anticipated 3-Yr Reevaluation:	<input type="text"/>
Comments:	
<input type="text"/>	
Household Information	
<input type="checkbox"/> Interpreter Needed	
Other Accommodations Needed:	
<input type="text"/>	

Meeting Type

Select the PURPOSE OF MEETING by checking the appropriate box. The purpose for the meeting should correspond to the purpose set forth in the written notice of the IEP meeting.

Interim IEP

Select "Interim IEP" if the purpose of the meeting is for an interim individualized educational program is being developed by a public agency for a pupil with a disability, other than a gifted and talented pupil, who is being considered for special education services if the pupil was determined to be eligible for special education by another public agency or in another state. If the pupil was determined to be eligible for special education in another state, a determination of eligibility pursuant to this chapter must be made before the pupil is eligible to receive special education in this State.

Annual IEP

Select “Annual IEP” if the purpose of the meeting is for the annual development a pupil’s individualized educational program

Initial IEP

Select “Initial IEP” if the purpose of the meeting is for the initial development a pupil’s individualized educational program.

IEP Following 3-Yr Reevaluation

Select “IEP Following 3-Yr Reevaluation” if the purpose of the meeting is for the development a pupil’s individualized educational program following 3-Year Reevaluation.

Revision to IEP Dated

Select “Revision to IEP Dated” if the purpose of the meeting is for an addendum to a pupil’s individualized educational program.

***Note: The Date field should be the same as the Start Date of the IEP that is being Amended.**

Exit Graduation

Select “Exit Graduation” Select the appropriate Exit Code
Basis of Exit

Code	BASIS OF EXIT
B18	Standard Diploma
B19	Advanced Diploma
B21	Adjusted Diploma
B23	Advanced Honors Diploma
B52	Dropped Out
D24	Transferred to Regular Education
D25	Parent Refused Services
D40	Moved known to be continuing
D41	Moved not known to be continuing
D43	Reached Max Age
EB1	Died

***Note: When a student exits the Case Manager will need to contact the registrar and let them know that they will need to update the student’s special education fields in the Enrollment tab.**

IEP Revision Without a Meeting

If the IEP is being REVISED WITHOUT AN IEP MEETING (§300.324(a)(4)), check the appropriate box and indicate whether the revision without an IEP meeting was requested by the parent or the school district.

Other

Select “Other” if the purpose of the meeting is for any other reason.

***Note: If “Other” is selected the user must type the purpose in the text field provided.**

Comments

Use the COMMENTS to note any additional important information, e.g., that the meeting was conducted via telephone, that the meeting is being held in response to a parental request, or that the parent is not in attendance. If this page is completed in conjunction with an IEP revision, comments should reflect that unrevised content in the student’s previous IEP (specify date) remain in effect.

Date of Meeting

Record the DATE OF THE MEETING.

Date of Last IEP Meeting

Record the DATE OF LAST ANNUAL IEP MEETING that was conducted as an annual review.

IEP Services will Begin

Enter the date that IEP SERVICES WILL BEGIN (month/day/year).

***Anticipated Duration of Services**

Enter the date which corresponds to the ANTICIPATED DURATION OF SERVICES (the expected length of time this IEP will be in effect).

IEP Review Date

Enter the IEP REVIEW DATE. This date must be projected to be no more than one year from the date of this IEP meeting (month/day/year).

Eligibility Date

Record the ELIGIBILITY DATE of the most recent eligibility determination (month/day/year).

Anticipated 3-Yr Reevaluation

Project the ANTICIPATED 3-YR REEVALUATION three years from the most recent eligibility determination (month/day/year).

Interpreter Needed

Interpreter Needed refers to any special arrangements needed for the parent or student to participate in the IEP meeting. If the parent or student requires an interpreter s to participate in the meeting, note the arrangements that were made.

Other Accommodations Needed

Other Accommodations Needed refers to any special arrangements needed for the parent or student to participate in the IEP meeting. If the parent or student requires other accommodations to participate in the meeting, note the arrangements that were made.

Student Demographics

Student Demographics
 Note: At the point the plan is generated, a snapshot of the student data is taken. To get a fresh copy, click the button below.

Refresh Student Information

Last Name	First Name	Middle Name	Suffix
Gender	Birthdate	Student Address	
Race, Ethnicity (state)	Federal Designation	Race(s)	
Student Primary Language <i>English</i>	Student English Proficiency Code <input type="text"/>	LEP Status <i>Not LEP</i>	

Assigned School Information:

School Name <input type="text"/>	School Number <input type="text"/>
Address <input type="text"/>	
Telephone <input type="text"/>	
Zoned School <input type="text"/>	Other Zoned School <input type="text"/>

Student Number 384198702	Grade 07
-----------------------------	-------------

1. Student Information should auto populate in this box.
2. If the fields are not populated then the user can click the “Refresh Student Information” to pull the information from census.
3. If information still is not populated then the information must be first populated in the Census module.

Student Primary Language

This data is prepopulated from Census > People > Home Language

Student English Proficiency Code

- Select if the student is “Not LEP” or “LEP”
**NOTE: look at the LEP Status to the Right of the Code then select the corresponding code to match the LEP Status.*

Assigned School Information

Type in the School Name, Number, Address, and Telephone of the Assigned School.

If the Zoned School is other, then select “Other” in the drop down menu and type in the Other Zoned School.

Parent/Guardian Information

Parent/Guardian Demographics
 Note: At the point the plan is generated, a snapshot of the student data is taken. To get a fresh copy of the guardian information, click the button below.

Refresh Guardian Information

Parent/Guardian comes from the census system and the only people listed here are marked as guardians of the student's current household, or direct guardians to the student through the relationship.

Guardian	Name
Mother	
Home Phone	Work Phone Cell Phone
Email	
Primary Language Spoken at Home	
Addresses	

1. Parent/Guardian Information should auto populate in this box.
2. If the fields are not populated then the user can click the “Refresh Guardian Information” to pull the information from census.
3. If information still is not populated then the information must be first populated in the Census module.

Procedural Safeguards

Procedural Safeguards
☐ Parent/Guardian attended via telephone conference.

☐ I have received a statement of procedural safeguards under the Individuals with Disabilities Education Act (IDEA) and these rights have been explained to me in my primary language.


 AT LEAST ONE YEAR PRIOR TO REACHING AGE 18, STUDENTS MUST BE INFORMED OF THEIR RIGHTS UNDER IDEA AND ADVISED THAT THESE RIGHTS WILL TRANSFER TO THEM AT AGE 18


☐ Not applicable. Student will not be 18 within one year, and the student's next annual IEP meeting will occur no later than the student's 17th birthday.
☐ The student has been informed of his/her rights under IDEA and advised of the transfer of these rights at age 18.


PROCEDURAL SAFEGUARDS

- a. A copy of the procedural safeguards must be provided to the parent at least once per year. ([§300.504\(a\)](#)) However, during the IEP meeting these rights should be explained to the parent. After the parental rights have been explained, ask the parent to check the **Second box** and sign the form.
- b. Check the appropriate box to indicate whether the student has been informed of the transfer of rights that will occur at age 18. ([§300.320\(c\)](#)) This process must occur at least one year prior to the student's 18th birthday. Consequently, if the student is 16 at the time an IEP is being developed, and there is no expectation that another IEP meeting will be held prior to the student turning 17, the rights transfer must be discussed when the student is 16; otherwise, it will not be discussed at least one year prior to reaching age 18.

Present Levels (PLAAFP)

 Print

 New PLAAFP/MAGs

 Continue

Plan Outline nvIEP15

Education Plan

Student Demographics

Parent/Guardian Information

Procedural Safeguards

Present Levels (PLAAFP)

Strengths, Concerns, Interests, and

Present Levels of Academic Achievement and Functional Performance

PLAAFP Assessment

***Sequence #**

***ASSESSMENT CONDUCTED**

***ASSESSMENT RESULTS**

^

v

***EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN GENERAL EDUCATION CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES**

^

v

Sequence

Use this field to sequence the order of Assessments listed.

Assessment Conducted

Write the name of the assessment that provide pertinent information for the development of the IEP. This may include formal or informal methods, norm- or criterionreferenced tests, classroom observations, student work samples, teacher-made or other achievement tests, recent evaluations, behavior rating scales, performance data from regular education teachers, parental input, etc.

Assessment Results

Describe the assessment results corresponding to the assessments conducted. Build a profile of the student's current abilities.

EFFECT ON STUDENT'S INVOLVEMENT AND PROGRESS IN THE GENERAL CURRICULUM OR, FOR EARLY CHILDHOOD STUDENTS, INVOLVEMENT IN DEVELOPMENTAL ACTIVITIES

Describe how the student's disability affects his or her involvement and progress in the general curriculum. For early childhood students, focus on the student's involvement in appropriate developmental activities. Information recorded here should relate to the assessment results. In describing the student's current and anticipated level of participation in the general curriculum, consider the following:

- a) If the student is currently participating in regular education classes, the regular education teacher(s) must be consulted regarding the student's performance relative to the classroom expectations. The regular education teacher(s) should share information regarding the accommodations, modifications, or supports that are currently being provided or might be required in order for the student to participate meaningfully in the general curriculum.
- b) If instruction in the general curriculum is being provided in a resource or self-contained setting, regular education teachers should be consulted regarding curriculum content and achievement level expectations.
- c) If the student has not participated in the general curriculum due to the nature and severity of his or her disability, information about the student's performance in applied academics, functional academics, vocational skills training, and other alternative programs will also be useful to the team.

Strengths, Concerns, Interests, and Preferences

Strengths, Concerns, Interests, and Preferences	
*STATEMENT OF STUDENT STRENGTHS:	<div></div>
*STATEMENT OF PARENT EDUCATIONAL CONCERNS:	<div></div>
*STATEMENT OF STUDENT'S PREFERENCES AND INTERESTS: <i>(required if transition services will be discussed, beginning at age 14 or younger if appropriate)</i>	<div></div>
If student was not in attendance, describe the steps taken to ensure that the student's preferences and interests were considered	<div></div>

STATEMENT OF STUDENT STRENGTHS ([§300.324\(a\)\(i\)](#))

Formulate a statement of student strengths to capture key information that can be utilized in developing goals and objectives. A student's strengths are revealed through assessments, observations, and other data; strengths are also revealed through input from parents, teachers, and others who have worked with the student. Input from the student is also important in reflecting strengths.

STATEMENT OF PARENT EDUCATIONAL CONCERNS ([§300.324\(a\)\(ii\)](#))

Complete the statement to reflect the parents' concerns as they relate to the student's educational success. This information should be taken into consideration when determining IEP services.

STATEMENT OF STUDENT'S PREFERENCES AND INTERESTS ([§300.321\(b\)\(2\)](#))

Write a statement of student's preferences and interests if transition services are being discussed, beginning when the student is 14 or younger if appropriate. This information may be collected before the meeting or solicited from the student during the meeting. If transition will be discussed at the meeting, the student must be invited. ([§300.321\(b\)\(1\)](#)) Also, the written notice of the IEP meeting must specify that transition services will be discussed and that the student is being invited. ([§300.322\(b\)\(i\)](#))

CONSIDERATION OF SPECIAL FACTORS ([§300.324\(a\)\(2\)](#); [§300.324\(b\)\(2\)](#); [NAC388.284](#), [NRS §388.477](#), [AB 341](#))

- Check Yes or No to indicate the team's consideration of each of the six special factors in this section.
- Each of these factors may impact the development of a student's IEP. If the team chooses Yes for any of the factors, address this factor in the student's IEP. The team may address special factors in a variety of ways, including goals and objectives, behavior plans, supplementary aids and services, related services, accommodations, or modifications.
- If the student is deaf or hard of hearing the IEP committee must consider all of the following options for item #5 in accordance with NRS §388.477. If the student has been found eligible for a specific learning disability and dyslexia then the IEP committee must consider all of the

following options for item #5 in accordance with [AB 341](#).

Consideration of Special Factors	
<p>*1. Does the student's behavior impede the student's learning or the learning of others?</p> <p><input type="checkbox"/> No. <input type="checkbox"/> Yes.</p> <p>If YES, IEP committee must provide positive behavioral strategies, supports and interventions, or other strategies, supports and interventions to address that behavior.</p> <p><input type="checkbox"/> Addressed in IEP</p>	
<p>*2. Does the student require assistive technology devices and services?</p> <p><input type="checkbox"/> No. <input type="checkbox"/> Yes.</p> <p>If YES, IEP committee must determine nature and extent of devices and services.</p> <p><input type="checkbox"/> Addressed in IEP</p>	
<p>*3. Does the student have limited English proficiency?</p> <p><input type="checkbox"/> No. <input type="checkbox"/> Yes.</p> <p>If YES, IEP committee must consider the following (check box if IEP committee considered the item):</p> <p><input type="checkbox"/> Language needs of the student as those needs relate to the student's IEP.</p>	
<p>*4. Is the student blind or visually impaired?</p> <p><input type="checkbox"/> No. <input type="checkbox"/> Yes.</p> <p>If YES, IEP committee must evaluate reading and writing skills, needs, and appropriate reading and writing media (including an evaluation of the child's future needs for instruction in Braille or use of Braille) and must provide for instruction in Braille and use of Braille unless determined not appropriate for the student.</p> <p><input type="checkbox"/> Braille instruction and use of Braille is not appropriate for student.</p> <p><input type="checkbox"/> Braille instruction and use of Braille is addressed in IEP.</p>	
<p>*5. Is the student deaf or hard of hearing?</p> <p><input type="checkbox"/> No. <input type="checkbox"/> Yes.</p> <p>If YES, IEP committee must consider the student's language and communication needs and consider the following (check box if IEP committee considered the item):</p> <p><input type="checkbox"/> The related services and program options that provide the student with an appropriate and equal opportunity for communication access.</p> <p><input type="checkbox"/> The student's primary communication mode.</p> <p><input type="checkbox"/> The availability to the student of a sufficient number of age, cognitive, academic and language peers of similar abilities.</p> <p><input type="checkbox"/> The availability to the student of adult models who are deaf or hearing impaired and who use the student's primary communication mode.</p> <p><input type="checkbox"/> The availability of special education teachers, interpreters and other special education personnel who are proficient in the student's primary communication mode.</p> <p><input type="checkbox"/> The provision of academic instruction, school services and direct access to all components of the educational process, including, without limitation, advanced placement courses, career and technical education courses, recess, lunch, extracurricular activities and athletic activities.</p> <p><input type="checkbox"/> The preferences of the parent or guardian of the student concerning the best feasible services, placement and content of the student's IEP.</p> <p><input type="checkbox"/> The appropriate assistive technology necessary to provide the student with an appropriate and equal opportunity for communication access.</p>	
<p>*6. Does the student have a Specific Learning Disability and Dyslexia?</p> <p><input type="checkbox"/> No. <input type="checkbox"/> Yes.</p> <p>If YES, the IEP committee must consider the following instructional approaches (check box if IEP committee considered the item):</p> <p><input type="checkbox"/> Explicit, direct instruction that is systematic, sequential and cumulative and follows a logical plan of presenting the alphabetic principle that targets the specific needs of the student.</p> <p><input type="checkbox"/> Individualized instruction to meet the specific needs of the student in an appropriate setting that uses intensive, highly-concentrated instruction methods and materials that maximize student engagement.</p> <p><input type="checkbox"/> Meaning-based instruction directed at purposeful reading and writing, with an emphasis on comprehension and composition.</p> <p><input type="checkbox"/> Multisensory instruction that incorporates the simultaneous use of two or more sensory pathways during teacher presentations and student practice.</p>	

Transition

<p>Transition</p> <p>*DIPLOMA SELECTED FOR GRADUATION: Must be declared at age 14 and reviewed annually</p> <p><input type="checkbox"/> Standard or Advanced High School Diploma Must complete all applicable credit requirements and pass the High School Proficiency Examination (with permissible accommodations as needed)</p> <p><input type="checkbox"/> Adjusted High School Diploma Must complete IEP requirements.</p> <p>*STUDENT'S VISION FOR THE FUTURE: A short statement that directly quotes what the student wants for the future.</p> <p><input type="text"/></p> <p>*STATEMENT OF TRANSITION SERVICES: COURSE OF STUDY Beginning at age 14 or younger if determined appropriate by the IEP team, describe the focus of the student's course of study.</p> <p><input type="text"/></p> <p>STATEMENT OF MEASURABLE POSTSECONDARY GOALS: Beginning not later than the first IEP to be in effect when the student is 16, describe measurable postsecondary goals in the following areas:</p> <p>*Training/Education</p> <p><input type="text"/></p> <p>*Employment</p> <p><input type="text"/></p> <p><input type="checkbox"/> Independent Living Skills (As Appropriate)</p> <p><input type="checkbox"/> Other</p> <p><input type="text"/></p>
--

DIPLOMA OPTION SELECTED FOR GRADUATION ([NAC §389](#))

Check the box that reflects the IEP team's decision regarding the appropriate diploma option for the student. The team must select an option beginning at age 14 and review this choice annually.

Standard or Advanced High School Diploma

Check box if student will complete all applicable credit requirements and pass the EOC (with permissible accommodations as needed)

Adjusted High School Diploma

Check box if student will receive an adjusted High School Diploma for completion of IEP requirements.

STUDENT'S VISION FOR THE FUTURE

Include the student's vision for the future--a short statement that directly quotes what the student wants for the future.

STATEMENT OF TRANSITION SERVICES: COURSE OF STUDY ([NAC §388.284.1\(e\)](#))

Describe the anticipated course of study the student will be pursuing (such as participation in advanced placement courses or a vocational education program) that will promote movement to postsecondary goals. In completing this section, focus attention on how the student's educational program can be planned to help the student make a successful transition to his/her goals for life

after secondary school. Consider the relationship of the course work selected to the student's preferences and interests [described in the vision statement and statement of measurable postsecondary goals] as well as present levels of academic achievement and functional performance. As indicated on the form the student's course of study is to be determined beginning at age 14 or younger if determined by the team.

STATEMENT OF MEASURABLE POSTSECONDARY GOALS [\(§300.320\(b\)\(1\)\)](#)

- a. Measurable postsecondary goals must be written, at a minimum, for Training/Education and Employment.
- b. The descriptions reflect what the student wants to do after high school—the descriptions are measurable if the accomplishment of the postsecondary goal could be verified at some point in the future (e.g., whether or not a student obtained employment as an electrician).

STATEMENT OF TRANSITION SERVICES: COORDINATED ACTIVITIES (§300.320(b)(2))

Transition Services	
STATEMENT OF TRANSITION SERVICES: COORDINATED ACTIVITIES	
<i>Beginning not later than the first IEP to be in effect when the student is 16, develop a statement of needed transition services, including strategies or activities, for the student.</i>	
*Instruction	
<div></div>	
Any Other Agency Involvement(Optional) <div></div>	
*Related Services	
<div></div>	
Any Other Agency Involvement(Optional) <div></div>	
*Community Experiences	
<div></div>	
Any Other Agency Involvement(Optional) <div></div>	
*Employment and Other Post-School Adult Living Objectives	
<div></div>	
Any Other Agency Involvement(Optional) <div></div>	
Acquisition of Daily Living Skills and Functional Vocational Evaluation (if appropriate)	
<div></div>	
Any Other Agency Involvement(Optional) <div></div>	
Other	
<div></div>	
Any Other Agency Involvement(Optional) <div></div>	

Instruction

Instruction is the use of formal techniques to impart knowledge. It is typically provided in schools (e.g., regular education classes, academic instruction, tutoring arrangements, etc.). Instructional activities may be provided by various entities or in other locations (e.g., adult basic education, 2+2 programming, post-secondary schools).

Related Services

Enter services necessary to assist the student to benefit from specially designed instruction.

Describe areas where related services are being provided that support attainment of postsecondary goals. E.g. (RS in counseling support positive student: peer interactions and positive student: adult interactions)

Community Experiences

Community experiences are those services provided outside of the school building, in the community settings, or perhaps by schools or other agencies (e.g., community-based work experiences, job site training programs, banking, shopping, transportation, community counseling, recreational services, independent living centers, adult service providers, etc.).

Employment and Other Post-School Adult Living Objectives

Employment and other post-school adult living objectives are services that lead to a job or career. The objectives may also include adult activities that are done infrequently, such as registering to vote, doing taxes, renting a home, accessing medical services, SSI, filing for insurance, etc. The school or other entities could provide these activities.

Acquisition of Daily Living Skills and Functional Vocational Evaluation




- Daily living skills are those activities adults do every day (e.g., preparing meals, budgeting, maintaining a home, paying bills, caring for clothes, personal grooming etc.). The school or other entities could provide these activities.
- Functional vocational evaluation is an assessment process that provides information about job or career interests, aptitudes and skills. It may be gathered through situational assessments, observations, or formal measures. It should be practical. Schools or other entities could provide these activities.

Other

Use this area to add any other Agency involvement with the student (Optional).

***Note: The above options must be addressed but can say “none needed.”**

Goals and Objectives

 Print	 New Plan Goal	 Continue
Plan Outline nvIEP15 Education Plan Student Demographics Parent/Guardian Information Procedural Safeguards Present Levels (PLAAFP) Strengths, Concerns, Interests, and Preferences	Goals and Objectives <div></div>	

Select “New Plan Goal”

<p>Goals and Objectives</p>
<p>Goal Editor</p> <p>*MEASURABLE ANNUAL GOAL <input type="checkbox"/></p> <p>(including how progress toward the annual goal will be measured)</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div> <p><input type="checkbox"/> Check here if this goal supports the student's postsecondary goal(s) and identify the goal(s) to which it relates:</p> <p><input type="checkbox"/> Training/Education</p> <p><input type="checkbox"/> Employment</p> <p><input type="checkbox"/> Independent Living Skills</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> Check here if this goal will be addressed during Extended School Year Services (ESY)</p>

MEASURABLE ANNUAL GOAL ([§300.320\(a\)\(2\)](#))

- a) Annual goals are developed for each area of need identified by the IEP team in the PLAAFP; STRENGTHS, CONCERNS, INTERESTS, AND PREFERENCES; and the STATEMENT OF TRANSITION SERVICES.
- b) There is a one-to-one correspondence between identified need, current performance level, and annual goal. Annual goals represent the IEP team's estimate of what the student can reasonably be expected to accomplish with specially designed instruction or support during the next 12 months. Annual goals reflect the IEP team's judgment, based on current levels of performance, potential for learning, and rate of development, regarding what the student should accomplish. The team answers the question, "With specially designed instruction, what do we expect the student to do or know at the end of the next 12 months?"
- c) Goal statements should have four parts:
 - a. Direction of the behavior (e.g., increase, maintain, decrease);
 - b. Area of needs (e.g., reading, social skills, communication);
 - c. Level of attainment or success (e.g., to grade level, with 100% accuracy, or as appropriate for a typical six-year-old);
 - d. How progress toward the annual goal will be measured.
- d) The measurable annual goals should relate to meeting the student's needs that result from the student's disability to enable the student to be involved in and progress in the general curriculum and meeting each of the student's other educational needs that result from the student's disability. (Appendix A, Question 1)
- e) Beginning not later than the first IEP to be in effect when the student is 16, the IEP must include measurable goals that support the student's postsecondary goal(s) in the areas of training/education, employment, and (as appropriate) independent living skills. Check applicable boxes to indicate the areas addressed.

- f) If an IEP team determines that a student will receive Extended School Year (ESY) services, check applicable boxes to indicate the goal(s) that will be addressed during ESY.

STATEMENT OF TRANSITION SERVICES: COORDINATED ACTIVITIES (§300.320(b)(2))

- a) Write a statement of transition strategies or activities to work toward the measurable postsecondary goals already identified. The statement must address each type of coordinated activity: instruction, related services, community experiences, the development of employment and other post-school adult living objectives; and, if appropriate, acquisition of daily living skills and a functional vocational evaluation.
- b) Develop measurable annual goals and benchmarks or short-term objectives in the IEP for each strategy or activity the district will provide.
- c) Consider the following information inputted in the [Transition Services editor](#).

Objectives

Save
Save & Continue
Delete
Print
New Plan Goal
New Plan Goal Objective

Goals and Objectives

Goal 1

Objectives

*#:

*BENCHMARK OR SHORT-TERM OBJECTIVE

Add Plan Goal Objective

(Sequence)

Use this fields to sequence the order of Assessments listed.

BENCHMARK OR SHORT-TERM OBJECTIVE (NAC §388.284.1(b))

Each annual goal must include either benchmarks or short-term objectives. The purpose of both is to enable a student's teachers, parents, and others involved in developing and implementing the IEP to gauge, at intermediate times during the year, how well the student is progressing toward achievement of the annual goal. An IEP team may use either short-term objectives or benchmarks or a combination of the two depending on the nature of the annual goals and the needs of the student.

- a. **BENCHMARK.** IEP teams may develop benchmarks, which can be thought of as describing the amount of progress the student is expected to make within specified segments of the year. Generally, benchmarks establish expected performance levels that allow for regular checks of progress that coincide with the reporting periods for informing parents of the student's progress toward achieving the annual goals.

- b. **SHORT-TERM OBJECTIVE.** Alternatively, IEP teams may develop short-term objectives that generally break the skills described in the annual goal down into discrete components.

Methods for Reporting Progress ([§300.320\(a\)\(3\)](#))

Method for Reporting Progress

***METHOD FOR REPORTING THE STUDENT'S PROGRESS TOWARD MEETING ANNUAL GOALS**
 (check all methods that will be used)

☐ IEP Goals Pages
 ☐ District Report Card

☐ Specialized Progress Report
 ☐ Parent Conferences

☐ Other

***PROJECTED FREQUENCY OF REPORTS**

☐ Quarterly
 ☐ Semester

☐ Trimester
 ☐ Other

METHOD FOR REPORTING THE STUDENT'S PROGRESS TOWARD MEETING ANNUAL GOALS

- a. State and federal law require that the IEP team determine how the student's parents will be regularly informed (such as through the use of quarterly or other periodic reports, or other means) of their child's progress toward the annual goals. ([§300.347\(a\)\(7\)](#))
- b. Check the boxes to reflect the methods by which progress will be reported. More than one method may be selected.

PROJECTED FREQUENCY OF REPORTS

Check the box to project the frequency of reports.

SPED Services

Print
 New Service Provided
 Continue

Plan Outline nvIEP16

Education Plan
 Student Demographics
 Parent/Guardian Information
 Procedural Safeguards
 Present Levels (PLAAFP)
 Strengths, Concerns, Interests, and Preferences
 Special Factors
 Transition
 Transition Services
 Goals and Objectives
 Method for Reporting Progress
 SPED Services
 Supplementary Aids and Services

Service Provided List

Service Provided	Time	Start Date	End Date

- Click on New Service Provided

Services

SPECIALLY DESIGNED INSTRUCTION (§300.320(a)(4))

- Federal regulations require a statement of the special education services that will be provided for the student to advance appropriately toward attaining the annual goals; to be involved and progress in the general curriculum and to participate in extracurricular and other nonacademic activities; and to be educated and participate with other students with disabilities and nondisabled students in these activities.
- This section summarizes the special education services to be provided to the student in the areas for which annual goals have been written. Describe the area in which specially designed instruction will be provided. While teaching and related service methodologies or approaches are appropriate topics for discussion and consideration by the IEP team, they are not expected to be written into the IEP. In general, changing a particular method or approach would not necessitate an additional IEP meeting. (Congressional Committee Report, HR-5, 1997)
- If a student will receive specialized instruction in an academic content area, write the content area in this column (e.g., Math, English/Language Arts, Science). If a student is receiving specially designed instruction in other areas, write the focus of the specially designed instruction in this column (e.g., study skills, vocational skills, community-based functional skills).

Service Provider

If the District chooses to populate this field then they would select the staff member who will be providing the services.

Service Position

Select the position of the staff member who will be providing the services.

Location of Service

Describe the location where the services will be provided. The location of services in the context of an IEP generally refers to the type of environment that is the appropriate place for provision of the service. For example, the specially designed instruction may be provided in the student's regular classroom or in a resource room.

Start Date

Enter the date when the specially designed instruction is scheduled to begin. In most instances, this date will correspond to the IEP initiation and the date IEP Services will begin on the first page of the IEP.

End Date

Enter the date when the specially designed instruction is scheduled to end. In most instances, this date will correspond to the IEP termination and the Anticipated Duration of Services noted on the first page of the IEP.


Service Minutes


Provide the number of service minutes that corresponds with the frequency of the services that will be provided.


Frequency

In the drop down menu select how often the services will be provided.

SUPPLEMENTARY AIDS AND SERVICES [\(§300.320\(a\)\(4\)\)](#)

 Print

 New Service Provided

 Continue

Plan Outline nvIEP16

Education Plan

Student Demographics

Parent/Guardian Information

Procedural Safeguards

Present Levels (PLAAFP)

Strengths, Concerns, Interests, and Preferences

Special Factors

Transition

Transition Services

Goals and Objectives

Method for Reporting Progress

SPED Services

Supplementary Aids and Services

Service Provided List			
Service Provided	Time	Start Date	End Date

- Click on New Service Provided

Supplementary Service	
*Services	
<input type="text"/>	
Service Provider	
<input type="text"/>	
Service Position	
<input type="text"/>	
*Location of Service:	
<input type="text"/>	
*Start Date:	*End Date:
<input type="text" value="06/24/2015"/>	<input type="text" value="06/18/2016"/>
*Service Minutes	*Frequency
<input type="text"/>	year <input type="text"/>

Services

Enter the supplementary aids and services, program modifications or supports that for school personnel that will be provided for the student.

Note: (MODIFICATION, ACCOMMODATION, OR SUPPORT FOR STUDENT OR PERSONNEL)

- Federal regulations require a statement of the supplementary aids and services and program modifications or supports for school personnel that will be provided for the student to advance appropriately toward attaining the annual goals; to be involved and progress in the general curriculum and to participate in extracurricular and other nonacademic activities; and to be educated and participate with other students with disabilities and nondisabled students in these activities.
- Describe each appropriate **MODIFICATION, ACCOMMODATION, OR SUPPORT FOR STUDENT OR PERSONNEL**; alternatively, select the number from the supplemental list titled "Modifications, Accommodations, and Supports" and enter the corresponding number in this row. If the modification, accommodation, or support is needed in a specific content area, specify the area(s). For example, if a student has difficulty in reading and requires more time to take tests that require reading, specify the content areas (e.g., history, social studies) where the accommodation for test-taking will be provided. Some of the items listed require additional descriptions. If these items are referred to by number on the IEP, the additional description must be provided. For example, number 7, "Special Seating," requires a description of the nature of the seating for an individual student. The row could be completed as follows: **#7, in front row for all regular classes.**
- If the supplemental list is used, a copy must be attached to the IEP and given to the parent so that the references are clear. In general, accommodation involves adapting instructional strategies (materials, manner of presentation, grouping format) and/or the classroom environment (seating arrangements, lighting, sound, etc.) for students with special needs. Classroom accommodations can be made across educational settings, such as the regular education classroom, the resource room, and special classes.
- In general, modification means changing the program/curriculum when reasonable accommodations will not be effective in allowing the student to participate in the regular education classroom. Modifications are greater or more extensive changes that significantly alter

- ## Location of Service

Start Date

End Date

Service Minutes

Frequency

RELATED SERVICES (§300.320(a)(4)), (NAC 388.101)

Click on New Service Provided

Related Service	
*Service	
<input type="text"/>	
Service Type	
<input type="text"/>	
Service Type Description	
<input type="text"/>	
Service Provider	
<input type="text"/>	
Service Position	
<input type="text"/>	
*Location of Service:	
<input type="text"/>	
*Start Date:	*End Date:
<input type="text" value="06/24/2015"/>	<input type="text" value="06/18/2016"/>
*Service Minutes	*Frequency
<input type="text"/>	year <input type="text"/>

Service

Select the related services that are necessary for the student to benefit from special education.

Service Type

Select **A** for assessment services, **C** for consultative services, or **D** for direct services.

Service Type Description

If other service delivery models are used, provide a description.

Location of Service

Describe the location where the services will be provided. The location of services in the context of an IEP generally refers to the type of environment that is the appropriate place for provision of the service. For example, the specially designed instruction may be provided in the student's regular classroom or in a resource room.

Start Date

Enter the date when the specially designed instruction is scheduled to begin. In most instances, this date will correspond to the IEP initiation and the date IEP Services will begin on the first page of the IEP.

End Date

Enter the date when the specially designed instruction is scheduled to end. In most instances, this date will correspond to the IEP termination and the Anticipated Duration of Services noted on the first page of the IEP.

Service Minutes

Provide the number of service minutes that corresponds with the frequency of the services that will be provided.

Frequency

In the drop down menu select how often the services will be provided.

Statewide and/or District-wide Assessments [\(§300.320\(a\)\(6\)\)](#)

Print
 New Assessment
 Continue

Plan Outline nvIEP15

Education Plan
 Student Demographics
 Parent/Guardian Information
 Transition Services
 SPED Services
 Supplementary Aids and Services
 Related Services
 Statewide and/or District-wide Assessments
 Placement
 Enrollment Status

Participation in Statewide and/or District-wide Assessments

Click on New Service Provided

Assessment Participation

***Assessment Name:**

State Criterion-Referenced Test (CRT)
 End of Course Exams
 College and Career Readiness Assessment
 Other

Other Assessment Name:

If the student will participate in regular assessment, does the student require accommodations?

☐ No
 ☐ Yes. If yes, list on the Accommodation(s) for the Nevada Proficiency Examination Program (attach form).

List Accommodation(s):

Assessment Name

Select the assessment name; State Criterion-Referenced Tests, the End of Course Exams, College and Career Readiness Assessment or Other.

***NOTE:** Accommodations not specifically listed (those that might be added as "Other") must be approved individually by the Nevada Department of Education to assure a valid administration of the test. Accommodations for participation in district-wide tests must be in accordance with district guidelines.

- State Criterion-Referenced Test (CRT)
 - Option for participation in the NAA is provided when you select the CRT.
 - If Alternate box is check then you must fill out the CRT Alternate Assessment Editor
- End of Course Exams
- College and Career Readiness Assessment
- Other

Other Assessment Name

If Assessment Name option of “Other” was selected enter the name of the Assessment Name in this field.

Participation

Select how the student will participate in the state or district-wide assessments listed. NA applies if during the period of time covered by the IEP, the student will not be in the grade in which a particular assessment is administered.

If the student will participate in regular assessment does the student require accommodations?

Select Yes or No if the student will participate in regular accommodations.

***Note:** Occasionally, an IEP team may decide that there would be value in testing a student even though the provision of modifications will lead to an invalid administration. Write these modifications on the bottom of the "Accommodation(s) for the Nevada Proficiency Examination Program" form and attach to the IEP.

List Accommodation(s)

List on "Accommodation(s) for the Nevada Proficiency Examination Program"

***Note:** This list comes from the completed "Accommodation(s) for the Nevada Proficiency Examination Program" form for each student participating in a state assessment and attach to the IEP to reflect testing decisions made for the student.

***Note:** The "Accommodation(s) for the Nevada Proficiency Examination Program" form should be scanned and staple to the IEP. (when this form is stapled to the IEP then it is acceptable to enter the statement “see attached form” in this field.

CRT Alternate Assessment

***Note you must fill out this editor of the “Alternate” check box was selected for the CRT.**

State Criterion-Referenced Test (CRT) Alternate Assessment

The Nevada Alternate Assessment (NAA) is based on alternate achievement standards designed specifically for students with significant cognitive disabilities. Individualized Education Plan (IEP) teams are responsible for determining whether students with disabilities will participate in the alternate assessment or the general assessment (with or without accommodations), and should consider the student's present level of educational performance in reference to the Nevada Academic Content Standards (NVACS) in English Language Arts (ELA), Mathematics, and Science when determining how a student will participate in the Nevada Proficiency Examination Program (NPEP). In order to facilitate informed and equitable decision making, IEP teams should answer each of the following questions when determining whether or not a student should participate in the NAA:

Questions to Guide the Decision-Making Process to Determine Whether a Student Participates in the Nevada Alternate Assessment

<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the student receiving services under the Individuals with Disabilities Education Act (IDEA) through a current IEP?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the student demonstrate cognitive ability and adaptive behavior that limits full participation in the general education curriculum and state-wide assessments even with supplementary aids, accommodations, and modifications?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the student require substantial modifications, adaptations, or supports to meaningfully access the grade-level content?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the student require intensive instruction to acquire, maintain, and generalize skills necessary for application in school, home, work, and community settings?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the student's level of educational performance not primarily the result of specific learning disabilities; social, cultural, economic, or language differences; visual or auditory impairments; emotional-behavioral disabilities; or excessive or extended absences unrelated to the student's disabilities?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Has the IEP team informed the parent/guardian of the consequences of the student participating in the Nevada Alternate Assessment (e.g., modified diploma vs. standard diploma) and of being judged against alternate achievement standards? ¹

If the IEP team determines that all six questions accurately characterize a student's current educational program, then the Nevada Alternate Assessment should be used to provide a meaningful evaluation of the student's current academic achievement. If "yes" is not indicated in all six areas, then the student should participate in the general assessment with or without accommodations.

ALL STUDENT'S WHO ARE ENROLLED IN THE DISTRICT AND WHO MEET THE NAA PARTICIPATION CRITERIA MUST BE ASSESSED.

Students should be assessed at the grade level in which they are enrolled and coded in the school's student data information system, and their results will be reported accordingly for accountability purposes. For example, a student participating in a fifth-grade classroom and who is coded as a fifth grader in the school's student data information system would be expected to be assessed using the fifth-grade NAA, regardless of the student's chronological age.

The NAA is administered to a student only one time during high school, in the student's eleventh-grade year. Therefore, a student eligible to take the alternate assessment and enrolled as an eleventh grader should be assessed with the NAA. Consequently, a student enrolled in a tenth-grade classroom and coded as a tenth grader in the school's student data information system would not be assessed with the NAA until that student is coded as an eleventh grader in the student data information system.

***If the student will participate in an alternate assessment, explain why the student cannot participate in the regular assessment, and why the particular alternate assessment selected is appropriate.**

Students who qualify for the Nevada Alternate Assessment (NAA) and the College and Career Readiness Assessment (CCRA)

On November 20, 2014 the Nevada Department of Education release a memo on CCRA and IDEA guidelines. The following instruction below are based on the guidance from the afore mentioned memo and are NDE's recommendation for documenting students who are using the NAA as the alternate CCRA.

- 1) Select “State Criterion-Referenced Test (CRT)” in the “*Assessment Name:” drop list.

Assessment Participation

***Assessment Name:** State Criterion-Referenced Test (CRT) **Other Assessment Name:**

***Participation:**

☐ Yes ☐ N/A ☒ Alternate

If the student will participate in regular assessment, does the student require accommodations?

☐ No ☒ Yes. If yes, list on the Accommodation(s) for the Nevada Proficiency Examination Program (attach form).


List Accommodation(s):

See attached IEP/504 Accommodation(s) form.

- 2) Check the box next to “Alternate.” When click the box a box will appear stating “ You must fill the CRT Alternate Assessment in the next editor.” Click OK

You must fill the CRT Alternate Assessment in the next editor.

OK



- 3) Click the “Save Button”  Save
- 4) Select “Other” in the “*Assessment Name:” drop list.
- 5) In the “Other Assessment Name:” field type in “ NAA for College and Career Readiness Assessment”

Assessment Participation

***Assessment Name:** Other **Other Assessment Name:** NAA for College and Career Readiness Assessment

***Participation:**

☒ Yes ☐ N/A

- 6) Click the “Save Button”  Save
- 7) Click the “Continue” Button  Continue

- 8) In the “State Criterion-Referenced Test (CRT) Alternate Assessment” editor complete the Questions to Guide the Decision-Making Process to Determine Whether a Student Participates in the Nevada Alternate Assessment .

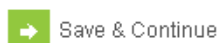
Questions to Guide the Decision-Making Process to Determine Whether a Student Participates in the Nevada Alternate Assessment

<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the student receiving services under the Individuals with Disabilities Education Act (IDEA) through a current IEP?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the student demonstrate cognitive ability and adaptive behavior that limits full participation in the general education curriculum and state-wide assessments even with supplementary aids, accommodations, and modifications?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the student require substantial modifications, adaptations, or supports to meaningfully access the grade-level content?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Does the student require intensive instruction to acquire, maintain, and generalize skills necessary for application in school, home, work, and community settings?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the student's level of educational performance not primarily the result of specific learning disabilities; social, cultural, economic, or language differences; visual or auditory impairments; emotional-behavioral disabilities; or excessive or extended absences unrelated to the student's disabilities?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Has the IEP team informed the parent/guardian of the consequences of the student participating in the Nevada Alternate Assessment (e.g., modified diploma vs. standard diploma) and of being judged against alternate achievement standards?"

- 9) If the student will participate in an alternate assessment, explain why the student cannot participate in the regular assessment, and why the particular alternate assessment selected is appropriate in the text field below:

**If the student will participate in an alternate assessment, explain why the student cannot participate in the regular assessment, and why the particular alternate assessment selected is appropriate.*

- 10) Click on the “Save & Continue” button



Extended School Year Services

Extended School Year Services

***Does the student require extended school year services?** ☐ No ☐ Yes

If YES, IEP goals and benchmarks/short-term objectives and/or related services to be implemented in ESY must be identified.

If need for ESY is to be determined at a later date, indicate date by which IEP decision will be made:

PERCENTAGE OF TIME IN REGULAR EDUCATION ENVIRONMENT

Calculate and list the average percentage of time this student will spend in the regular education environment.

JUSTIFICATION FOR PLACEMENT

INVOLVING REMOVAL FROM REGULAR EDUCATION ENVIRONMENTS

(§300.320(a)(5))

The team must explain why the student's IEP cannot be implemented in the regular education environment with the use of supplementary aids and services. Factors to consider relate to needs for specialized curriculum and instruction; highly individualized instructional methods and materials; extraordinary teacher expertise; frequency and intensity of staff intervention and support; and structured environments to support social/behavioral needs. This is not an exhaustive list of considerations, nor is it as specific as justification statements for a particular student should be. Justifications must be individualized and relate to each student's particular needs. Statements to avoid:

1. Statements that merely name or describe the student's disability category.
2. Statements that are too general and that do not justify removal from regular education settings based upon each student's unique needs.
3. Justification statements that rely solely on accommodations that can clearly be met in a less restrictive setting such as "a small group setting" or "1:1 instruction."

Placements that require removal of the student from regular classes must be justified in the student's IEP. Special classes, separate schooling, or other removal of students with disabilities from the regular educational environment can only occur if the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily. (§300.114) In selecting the least restrictive environment, consideration must be given to any potential harmful effect on the student or on the quality of services that he or she needs. (§300.116(d)) A student with a disability may not be removed from education in age-appropriate regular classrooms solely because of needed modifications in the general curriculum. (§300.116(e))

IEP Implementation

IEP Implementation

☐ Parent/Guardian attended via telephone conference.

☐ As the parent, I agree with the components of this IEP. I understand that its provisions will be implemented as soon as possible after the IEP goes into effect.

☐ As the parent, I disagree with all or part of this IEP. I understand that the school district must provide me with written notice of any intent to implement this IEP. If I wish to prevent the implementation of this IEP, I must submit a written request for a due process hearing to the local school district superintendent.

☐ A copy of this IEP was provided to the student's parent on:

IEP Implementation

- a. The IEP team should work toward consensus in making IEP decisions, but the school district has the ultimate responsibility to ensure that the IEP includes the services the student needs in order to receive a free appropriate public education. If the team cannot reach consensus, the public agency must provide the parents with prior written notice of the school district's proposals or

refusals, or both, regarding the student's educational program, and the parents have the right to seek resolution of any disagreements by initiating an impartial due process hearing.

- b. At the conclusion of the meeting, the parent may check either the **second box** (agree) or the **third box** (disagree) to indicate whether a consensus has been reached. If the parent does not wish to check either box, the school district must still determine whether a consensus has been reached, and follow the applicable procedures outlined above.

***Note: There is no legal requirement for parents to sign IEPs. It is a convenient method for documenting participation and for clarifying whether parents are in consensus with the provisions of the IEP. If the parent declines to complete and sign this section of the IEP, the district must evaluate whether consensus has been reached and must take the appropriate steps outlined above.**

DOCUMENTATION THAT COPY WAS PROVIDED TO PARENT

Use this line to document that a copy of the IEP was provided to the parent

Enrollment Status

Special Ed State Reported Data Elements
Note: At the point the plan is generated, a snapshot of the student data is taken. To get a fresh copy, click the button below.

The editable values will change the values in the IEP and it will update the special ed status values in any enrollments that intersect the dates of the plan. The update of the enrollment will only occur when the plan is marked completed.

State ID

*Primary Disability

Secondary Disability

*Special Ed Status

*Special Ed Setting

Resident District
:

Primary Disability

Click 'Get Special Ed Status from Enrollment' button to auto-populate the Primary Disability as *Read only* from student's enrollment.

Secondary Disability

The Secondary Disability should only be used for the reporting requirements of AB 316 to designate student's with ASD who has a Primary Disability that is not recorded as Autism

Special Ed Status

From the drop list, select the option that defines the student's status within the special education process at a specific school location and assists in the determination as to whether this student will be included in the school's Child Count.

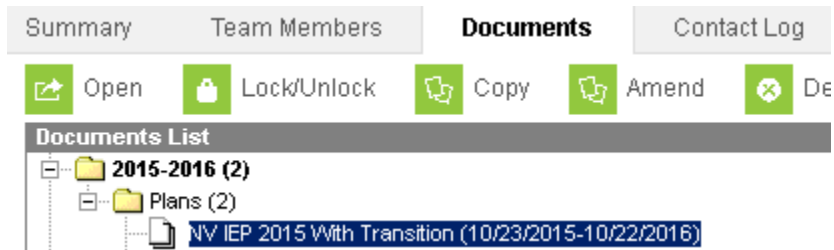
Once all of the required fields have been completed click the "Save" button



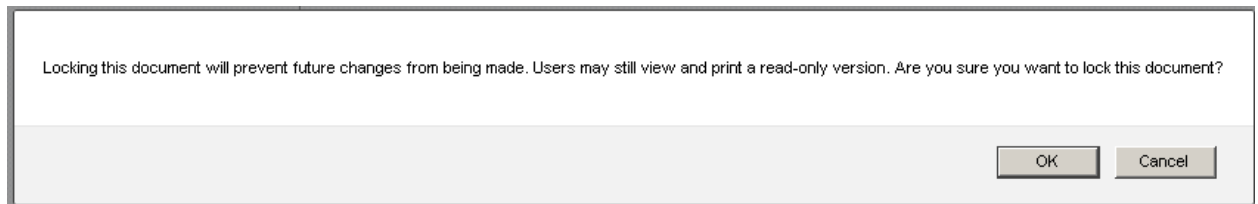
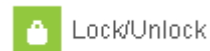
- After the IEP Meeting has been held and the IEP has been completed and saved the user will need back on the "Documents" tab

Documents

- Find the unlocked IEP and click once on the IEP so that it is highlighted



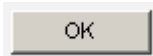
- Once the IEP has been highlighted click on the "Lock/Unlock" button
- A pop up box will appear with the message "Locking this document will prevent future changes from being made. Users may still view and print a read-only version. Are you sure you want to lock this document?"



***NOTE:** Once the IEP is locked it can only be unlocked by a special education administrator.

***NOTE:** An IEP needs to be locked for Infinite Campus to know that this is a student with an IEP and for the student to appear on Federal and State Reports.

- Press the "OK" button to lock the IEP.



Special Ed Status Chart

Code	Title	Description
0	No	Student no longer receives special education services (e.g., withdrawal, graduation, dropped out, exiting from Special Education services).
1	Yes	Student is actively enrolled in special education

- ***Setting:** From the drop list, select the appropriate LRE description. LRE settings are based upon student's age as of October 1st.

Nevada Department of Education

Special Ed Setting Chart

Code	Description
E1	Reg EC Prog \geq 10 hrs wk/srvcs in Reg EC The child is receiving the majority of hours of special education and related services in the regular early childhood program (and the child attends a regular early childhood program at least 10 hours per week).
E2	Reg EC Prog \geq 10 hrs wk/srvcs in Other Loc The child is receiving the majority of hours of special education and related services in some other location (and the child attends a regular early childhood program at least 10 hours per week).
E3	Reg EC Prog \leq 10 hrs wk/srvcs in Reg EC The child is receiving the majority of hours of special education and related services in the regular early childhood program (and the child attends a regular early childhood program less than 10 hours per week).
E4	Reg EC Prog \leq 10 hrs wk/srvcs in Other Loc The child is receiving the majority of hours of special education and related services in some other location (and the child attends a regular early childhood program less than 10 hours per week).
E5	SPED in Separate Class The child is attending a special education program in a class with less than 50% nondisabled children. (Do not include children who also attend a regular early childhood program. These children should be reported in categories E1, E2, E3, or E4.)
E6	SPED in Separate School The child is receiving education programs in public or private day schools designed specifically for children with disabilities. (Do not include children who also attend a regular early childhood program. These children should be reported in categories E1, E2, E3, or E4.)
E7	SPED in Residential Facility The child is receiving education programs in publicly or privately operated residential schools or residential medical facilities on an inpatient basis. (Do not include children who also attend a regular early childhood program. These children should be reported in categories E1, E2, E3, or E4.)
E8	Home The child is receiving special education and related services in the principal residence of the child's family or caregivers, and the child attends neither a regular an early childhood program nor a special education program provided in a separate class, separate school, or residential facility. Include children who receive special education both at home and in a service provider location or some other location that is not in any other category. The term caregiver includes babysitters.
E9	Service Provider Location The child receives all of the child's special education and related services from a service provider or some other location that is not in any other category, and the child attends neither a regular early childhood program nor a special education program provided in a separate class, separate school, or residential facility. For example, speech instruction provided in: <ul style="list-style-type: none"> • private clinicians' offices, • clinicians' offices located in school buildings, and • hospital facilities on an outpatient basis. Do not include children who also receive special education at home. Children who receive special education both in a service provider location and at home should be reported in the home category.
B9	Regular class 80-100% The child receives special education and related services inside the regular classroom for 80% or more of the school day. This may include children with disabilities placed in: <ul style="list-style-type: none"> • regular class with special education/related services provided within regular classes; • regular class with special education/related services provided outside regular classes; or • regular class with special education services provided in resource rooms.
B10	Regular class 40-79% The child receives special education and related services inside the regular classroom between 40 and 70% of the school day. This may include children placed in:

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Code	Description
	<ul style="list-style-type: none"> • resource rooms with special education/related services provided within the resource room; or • resource rooms with part-time instruction in a regular class.
B11	<p>Regular class 0-39%</p> <p>The child receives special education and related services inside the regular classroom less than 40% of the school day. These are children who received special education and related services outside the regular classroom for more than 60 percent of the school day. Do not include children who received education programs in public or private separate day or residential facilities. This category may include children placed in:</p> <ul style="list-style-type: none"> • self-contained special classrooms with part-time instruction in a regular class; or • self-contained special classrooms with full-time special education instruction on a regular school campus.
B12	<p>Separate school</p> <p>The child receives education programs in public or private separate day school facilities. This includes children with disabilities receiving special education and related services, at public expense, for greater than 50 percent of the school day in public or private separate schools. This may include children placed in:</p> <ul style="list-style-type: none"> • public and private day schools for students with disabilities; • public and private day schools for students with disabilities for a portion of the school day (greater than 50 percent) and in regular school buildings for the remainder of the school day; or • public and private residential facilities if the student does not live at the facility.
B13	<p>Residential Facility</p> <p>The child receives education programs and lived in public or private residential facilities during the school week. This includes children with disabilities receiving special education and related services, at public expense, for greater than 50 percent of the school day in public or private residential facilities. This may include children placed in:</p> <ul style="list-style-type: none"> • public and private residential schools for students with disabilities; or • public and private residential schools for students with disabilities for a portion of the school day (greater than 50 percent) and in separate day schools or regular school buildings for the remainder of the school day. <p>Do not include students who received education programs at the facility, but do not live there.</p>
B14	<p>Homebound/Hospital</p> <p>The child receives education programs in homebound/hospital environment includes children with disabilities placed in and receiving special education and related services in:</p> <ul style="list-style-type: none"> • hospital programs, or • homebound programs. <p>Do not include children with disabilities whose parents have opted to home-school them and who receive special education at the public expense.</p>
B15	<p>Correctional Facilities</p> <p>The child receives special education in correctional facilities. These data are intended to be a count of all children receiving special education in:</p> <ul style="list-style-type: none"> • short-term detention facilities (community-based or residential), or • correctional facilities.
B16	<p>Parentally placed in a private school</p> <p>The child has been enrolled by their parents or guardians in regular parochial or other private schools and whose basic education is paid through private resources and the child receives special education and related services at public expense from a local educational agency or intermediate educational unit under a service plan.² Include children whose parents chose to home-school them, but who receive special education and related services at the public expense. Do not include children who are placed in private schools by the LEA.</p>

NEVADA Decision Tree for Coding Educational Environments for Children Ages 3 through 5 with IEPs

Report each child in only one category. Please refer to state guidance and the Protocol Form for specific reporting requirements when using this decision tree.

Does the child attend a regular early childhood program?

